

## **SUPPLEMENTAL APPLICATION DATA SHEET**

### **Application Information**

Application Number::	10/551,284
Filing Date::	09/27/05
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	PROCESS AND PLANT FOR THE TREATMENT OF THE GLASS SHEETS OF AN ASYMMETRIC GLASS-SHEET PAIR
Attorney Docket Number::	021500-142
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	

Petition Included?: No

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?: No

### **Applicant Information**

Applicant Authority Type: Inventor

Primary Citizenship Country: Germany

Status: Full Capacity

Given Name: Dieter

Middle Name:

Family Name: FUNK

Name Suffix:

City of Residence: Witten

State or Province of Residence:

Country of Residence: Germany

Street of Mailing Address: Schutzenstrasse 16

City of Mailing Address: Witten

State or Province of Mailing Address:

Country of Mailing Address: Germany

Postal or Zip Code of Mailing Address: D-58452

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Joachim
Middle Name::	
Family Name::	PILZ
Name Suffix::	
City of Residence::	<del>Gelsenkirchen</del> <u>Oer-Erkenschwick</u>
State or Province of Residence::	
Country of Residence::	Germany
Street of Mailing Address::	<del>Stegemannsweg 99</del> <u>Haardstr. 63</u>
City of Mailing Address::	<del>Gelsenkirchen</del> <u>Oer-Erkenschwick</u>
State or Province of Mailing Address::	
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	<del>D-45897</del> <u>D-45739</u>
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Peter
Middle Name::	
Family Name::	MICHELS
Name Suffix::	
City of Residence::	Sprockhovel

State or Province of Residence::

Country of Residence:: Germany

Street of Mailing Address:: Am Kindler 1

City of Mailing Address:: Sprockhovel

State or Province of Mailing  
Address::

Country of Mailing Address:: Germany

Postal or Zip Code of Mailing  
Address:: D-45549

### **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/EP2004/002980	03/22/04

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
Germany	103 14 400.5	03/28/03	Yes

## **Assignee Information**

Assignee Name::	Pilkington Automotive Deutschland GmbH
Street of Mailing Address::	Otto-Seeling-Str. 7
City of Mailing Address::	Witten
State or Province of Mailing Address::	
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	D-58455